PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10718139

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN R SMALL ENTITY	
TOTAL CLAIMS			96				RAT	Έ	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			26 minus 20=		* 6		X\$ 9)=		OR	X\$18=	108,10
INDEPENDENT CLAIMS				nus 3 =	* /-		X43	=		OR	X86=	8600
MULTIPLE DEPENDENT CLAIM PRESENT							+145	5=		OR	+290≓	
* If the difference in column 1 is less than zero, enter "0" in column						olumn 2	TOTA	٩L		OR	TOTAL	964.00
CLAIMS AS AMENDED - PART II											OTHER	THAN
		(Column 1)		(Colur		(Column 3)	Column 3) SMALL E			OR	SMALL	ENTITY
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=	
	Independent	*	Minus	***		=	X43	=		OR	X86=	
Ľ	FIRST PRESE	NTATION OF M	JLTIPLE DEF	PENDENT	CLAIM		+145	_		OR	+290=	
							TO ADDIT. F			OD	TOTAL	
	(Column 1) (Column 2) (Column 3)									10	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	*	HIGH NUMI PREVIC	EST BER DUSLY	PRESENT EXTRA	RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*-	Minus	**		=	X\$ 9	=	:	OR	X\$18=	
	Independent	*	Minus	***		=	X43:	-		OR	X86=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CL				CLAIM		+145				+290=	
•							TO		:	OR	TOTAL	
•								EE		OR	ADDIT. FEE	
_		(Column 1) CLAIMS		(Colun		(Column 3)						
AMENDMENT C		REMAINING AFTER AMENDMENT		NUME PREVIO PAID I	BER DUSLY	PRESENT EXTRA	RATE	 	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=	X\$ 9:	=		OR	X\$18=	
	Independent	*	Minus	***		=	X43=		:	OR	X86=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+145:	_		OR	+290=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." OR ADDIT. FEE											1200-	
**	f the "Highest Nu	mber Previously Pa	id For" IN THI	S SPACE is	s less thai	n 20, enter "20."	TOT	AL	, ,		TOTAL	